

DATE of MAMMOGRAM:	TELEPHONE:
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Your
Hospital's
Logo
Here

Wellness Institute & Mammography Center
Street Address
City, State Zip
(202) 555 - 1212

NAME:
ADDRESS:
CITY / STATE / ZIP:

- The results of your recent mammogram are normal.

Although mammography is the most accurate method for early detection, not all cancers are found by mammography. A breast self-examination and professional physical exam are also recommended.

On the basis of your present mammogram, we recommend a repeat mammogram in _____ months.

- Your mammogram showed a finding that requires additional imaging studies.

For you to have these additional studies, they must be ordered by your physician. You and your physician should discuss these additional tests.

- Your mammogram shows an abnormality that is probably benign, but additional evaluation is needed.

On the basis of mammography alone, a repeat mammogram in _____ months is recommended. However, you should discuss these results with your physician, as well as your medical history, your physical breast exam, and your concerns.

- Your mammogram shows an abnormality that requires further follow-up by you and your physician. **You should do this as soon as possible.**

You and your physician will decide what additional tests are needed, based on the findings of your mammogram, your breast physical examination, your medical history and your concerns.

- Your mammogram shows an abnormality. We recommend that you **obtain your previous recent mammograms for comparison.**

Please personally bring your previous mammogram(s) or have them sent to Xxxx Hospital's Mammography Department. We will compare them to your present mammogram, and send a new report to both you and your physician. You may pick up previous mammogram(s) afterward, or we will send them back to the source facility. **If previous mammograms cannot be obtained, then another approach must be chosen. It is important that you discuss this with your physician.**

RADIOLOGIST:	DATE:
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PART OF THE MEDICAL RECORD